

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-----------|--------------|-----------------|
| FEE DETERMINATION | <i>HA</i> | <i>70891</i> | <i>5/18/31</i> |
| O.I.P.E. CLASSIFIER | <i>RE</i> | <i>20816</i> | <i>07-18-00</i> |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

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|---------------------|------------|---|--------------|
| ✓ | Rejected | N | Non-elected |
| — | Allowed | I | Interference |
| — (Through numeral) | Canceled | A | Appeal |
| ÷ | Restricted | O | Objected |

| Claim | Date | Claim | Date | Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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